Advancing Cancer Control Equity Research Through Transformative Solutions (RFA Concept)

Brenda Adjei, April Oh

On Behalf of Concept Sponsors: Division of Cancer Control and Population Science Center to Reduce Cancer Health Disparities



Cancer Disparities and Health Equity in Cancer Control

Despite advances in cancer research, disparities persist



- Driven in part by complex social, economic, and environmental structures, known as the social determinants of health (SDOH)
- Shift to cancer control equity requires a focus on root causes, in partnership with communities most affected by these inequities

Structural Inequities & Social Injustice Marginalization Stigmatization Discrimination Institutional **Environments** Laws **Inequities** due to Regulations Conditions Policies **Living Environments Risk Factors** Biomarkers Disparities Cancer/ Consequences Co-morbidity Screening and Detection Diagnosis Treatment Survivorship Mortality

Cancer Control Equity Research Gaps

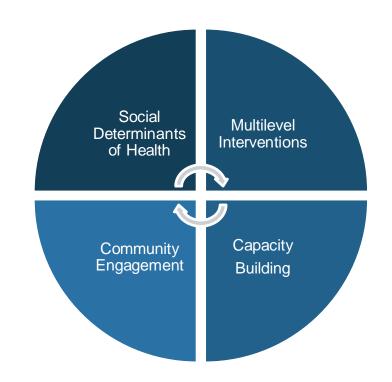
- Lack of interventions whose scope includes a focus on SDOH to address structural barriers
- Insufficient evidence for SDOH interventions that modify the mechanisms at multiple levels (operating at two or more levels)
- Limited investment in community engaged research and practice (methods, measures, and outcomes)
- Need better integration of capacity building among diverse scholars, stakeholders, and community partners that incorporate lived experiences into proposed interventions

Integrating Health Disparities Research and Practice to Advance Cancer Control Equity

Cancer control equity: Everyone has a fair and just opportunity to prevent, detect, receive quality care, and survive cancer with optimal quality of life.

Social Determinants of Health:

Conditions in the environment which people are born, grow, live, learn, work, play, and age and the wider set of forces and systems that shape the conditions of daily life.



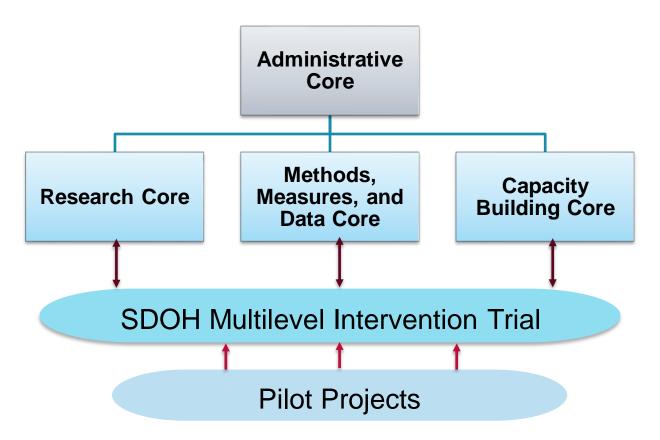
Proposed: Advancing Cancer Control Equity Research Through Transformative Solutions

Mechanisms: U19 (up to 4 Centers) and U24 (1 Coordinating Center)

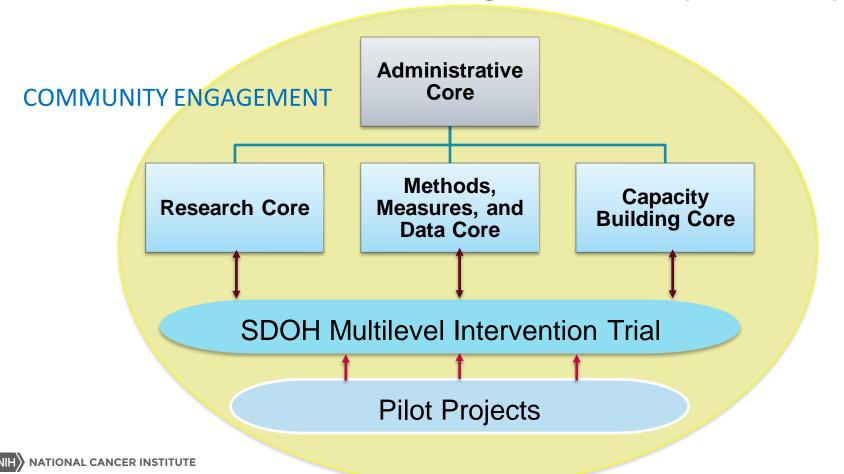
Purpose: Advance cancer control equity research by using community engagement to:

- Develop interventions that target the multilevel pathways by which social determinants of health impact adverse cancer outcomes
- Develop measures, evaluate, and assess community-level SDOH, community engagement and cancer control equity process and outcomes
- Build capacity among diverse scholars and community partners to implement interventions that incorporate the lived experiences of those who face cancer inequities

Research Centers: U19 Design Overview (Structure)



Research Centers: U19 Design Overview (Structure)



Social Determinants of Health Interventions to Improve Cancer Control Equity







CANCER CONTROL EQUITY OUTCOMES

Community Engagement

Food Insecurity

Housing Instability

Transportation barriers

Social Support, Programs, and Policies

Structural Racism

Community

Organizational

Families, Households

Interpersonal

Individual

Cancer prevention – smoking, diet, physical activity, other risks

Cancer Screening and Follow-up

Treatment completion

Quality of Life

U24 Coordinating Center

Purpose: Facilitate coordination and collaboration in the synthesis of cancer control equity research products, programs, and practice

- Advance synthesis of measurement in SDOH and health equity processes and outcomes
- Disseminate and enhance accessibility of culturally appropriate materials developed in the Centers
- Repository of evidence-based community engagement strategies
- Advance and support equitable and accessible data sharing
- Network-wide assessment of capacity building efforts and the impact of partnerships on sustainability
- Coordinating collaboration with other SDOH-relevant research Initiatives



Proposed U19 and U24 Budget FY24 - FY28

- U19 Centers
 - 4 Centers
 - Total Cost \$9.7M/year for 5yrs
 - Total Investment: \$48.5 M

- U24 Center
 - 1 Center
 - Total Cost \$825K/year for 5yrs
 - Total Investment: \$4.1 M

Evaluation Criteria

Short term (years 1-2)

- Delivery of capacity building activities and reach to underserved populations
- Engagement with Coordinating Center

Long term (years 3-5)

- Impact of social determinants of health interventions on cancer control inequalities
- Measurable reduction in community-level disparities
- Evidence of community impact of engagement on outcomes
- Collaboration and coordination for network wide impact on engagement
- Interventions, tools, and approaches that are ready for scale up

Clarifications in Response to BSA Subcommittee Feedback (Drs. Brawley, Coronado, and Basen-Engquist)

- <u>Cross-Center Collaboration</u>: promote research collaborations across Equity Centers (e.g., measurement, SDOH mechanisms, multilevel interventions)
- <u>Coordinating Center</u>: facilitate connections with other NCI and NIH funding SDOH and equity-focused initiatives; synthesize research findings, data elements, dissemination and delivery of training curricula/toolkits
- <u>Capacity Building and Training</u>: provide guidance to Centers on opportunities to support scholars and community partners including existing training mechanisms

